

PIGEON FALLS HEALTH CARE CENTER

13197 CHURCH STREET, P.O. BOX 310

PIGEON FALLS 54760 Phone: (715) 983-2293

Operated from 1/1 To 12/31 Days of Operation: 365

Operate in Conjunction with Hospital? No

Number of Beds Set Up and Staffed (12/31/03): 37

Total Licensed Bed Capacity (12/31/03): 37

Number of Residents on 12/31/03: 33

Ownership:

Highest Level License:

Operate in Conjunction with CBRF?

Title 18 (Medicare) Certified?

Title 19 (Medicaid) Certified?

Average Daily Census:

County

Skilled

No

No

Yes

32

Services Provided to Non-Residents		Age, Gender, and Primary Diagnosis of Residents (12/31/03)				Length of Stay (12/31/03)		%	
Home Health Care	No	Primary Diagnosis	%	Age Groups	%	Less Than 1 Year		30.3	
Supp. Home Care-Personal Care	No					1 - 4 Years		45.5	
Supp. Home Care-Household Services	No	Developmental Disabilities	0.0	Under 65	9.1	More Than 4 Years		12.1	
Day Services	No	Mental Illness (Org./Psy)	48.5	65 - 74	15.2			----	
Respite Care	Yes	Mental Illness (Other)	18.2	75 - 84	42.4			87.9	
Adult Day Care	No	Alcohol & Other Drug Abuse	0.0	85 - 94	30.3	*****			
Adult Day Health Care	No	Para-, Quadra-, Hemiplegic	0.0	95 & Over	3.0	Full-Time Equivalent			
Congregate Meals	No	Cancer	0.0		----	Nursing Staff per 100 Residents			
Home Delivered Meals	No	Fractures	0.0		100.0	(12/31/03)			
Other Meals	No	Cardiovascular	0.0	65 & Over	90.9	-----			
Transportation	No	Cerebrovascular	3.0	-----		RNs		9.4	
Referral Service	No	Diabetes	0.0	Gender	%	LPNs		10.9	
Other Services	No	Respiratory	0.0	-----		Nursing Assistants,			
Provide Day Programming for		Other Medical Conditions	30.3	Male	60.6	Aides, & Orderlies			
Mentally Ill	No		----	Female	39.4				
Provide Day Programming for			100.0		----				
Developmentally Disabled	No				100.0				

Method of Reimbursement

		Medicare (Title 18)		Medicaid (Title 19)		Other		Private Pay		Family Care		Managed Care							
		No.	%	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%	Total Resi- dents	% Of All
Int. Skilled Care	0	0.0	0	1	3.8	153	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	1	3.0
Skilled Care	0	0.0	0	20	76.9	131	0	0.0	0	6	85.7	123	0	0.0	0	0	0.0	26	78.8
Intermediate	---	---	---	5	19.2	108	0	0.0	0	1	14.3	105	0	0.0	0	0	0.0	6	18.2
Limited Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Personal Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Residential Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Dev. Disabled	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Traumatic Brain Inj	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Ventilator-Dependent	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Total	0	0.0		26	100.0		0	0.0		7	100.0		0	0.0		0	0.0	33	100.0

Admissions, Discharges, and Deaths During Reporting Period		Percent Distribution of Residents' Conditions, Services, and Activities as of 12/31/03				
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Percent Admissions from:		Activities of	%	% Needing Assistance of	% Totally	Total Number of
Private Home/No Home Health	5.9	Daily Living (ADL)	Independent	One Or Two Staff	Dependent	Residents
Private Home/With Home Health	5.9	Bathing	3.0	75.8	21.2	33
Other Nursing Homes	47.1	Dressing	21.2	66.7	12.1	33
Acute Care Hospitals	23.5	Transferring	30.3	60.6	9.1	33
Psych. Hosp.-MR/DD Facilities	0.0	Toilet Use	12.1	75.8	12.1	33
Rehabilitation Hospitals	5.9	Eating	51.5	39.4	9.1	33
Other Locations	11.8	*****				
Total Number of Admissions	17	Continence	%	Special Treatments	%	
Percent Discharges To:		Indwelling Or External Catheter	6.1	Receiving Respiratory Care	9.1	
Private Home/No Home Health	0.0	Occ/Freq. Incontinent of Bladder	57.6	Receiving Tracheostomy Care	0.0	
Private Home/With Home Health	0.0	Occ/Freq. Incontinent of Bowel	21.2	Receiving Suctioning	0.0	
Other Nursing Homes	0.0			Receiving Ostomy Care	0.0	
Acute Care Hospitals	0.0	Mobility		Receiving Tube Feeding	3.0	
Psych. Hosp.-MR/DD Facilities	6.3	Physically Restrained	0.0	Receiving Mechanically Altered Diets	27.3	
Rehabilitation Hospitals	0.0					
Other Locations	0.0	Skin Care		Other Resident Characteristics		
Deaths	93.8	With Pressure Sores	3.0	Have Advance Directives	84.8	
Total Number of Discharges		With Rashes	3.0	Medications		
(Including Deaths)	16			Receiving Psychoactive Drugs	63.6	

Selected Statistics: This Facility Compared to All Similar Rural Area Facilities & Compared to All Facilities

	This Facility %	Ownership: Government Peer Group %	Ratio	Bed Size: Under 50 Peer Group %	Ratio	Licensure: Skilled Peer Group %	Ratio	All Facilities %	Ratio
Occupancy Rate: Average Daily Census/Licensed Beds	86.5	87.6	0.99	89.7	0.96	84.0	1.03	87.4	0.99
Current Residents from In-County	78.8	77.0	1.02	66.7	1.18	76.2	1.03	76.7	1.03
Admissions from In-County, Still Residing	47.1	25.0	1.88	28.0	1.68	22.2	2.12	19.6	2.40
Admissions/Average Daily Census	53.1	107.5	0.49	74.8	0.71	122.3	0.43	141.3	0.38
Discharges/Average Daily Census	50.0	108.9	0.46	78.2	0.64	124.3	0.40	142.5	0.35
Discharges To Private Residence/Average Daily Census	0.0	48.3	0.00	14.1	0.00	53.4	0.00	61.6	0.00
Residents Receiving Skilled Care	81.8	93.7	0.87	81.4	1.01	94.8	0.86	88.1	0.93
Residents Aged 65 and Older	90.9	88.4	1.03	90.0	1.01	93.5	0.97	87.8	1.04
Title 19 (Medicaid) Funded Residents	78.8	66.9	1.18	74.0	1.06	69.5	1.13	65.9	1.20
Private Pay Funded Residents	21.2	18.9	1.12	16.0	1.32	19.4	1.09	21.0	1.01
Developmentally Disabled Residents	0.0	0.5	0.00	0.4	0.00	0.6	0.00	6.5	0.00
Mentally Ill Residents	66.7	46.3	1.44	60.6	1.10	36.5	1.83	33.6	1.98
General Medical Service Residents	30.3	16.7	1.82	11.3	2.69	18.8	1.61	20.6	1.47
Impaired ADL (Mean)	45.5	47.8	0.95	46.5	0.98	46.9	0.97	49.4	0.92
Psychological Problems	63.6	63.4	1.00	62.3	1.02	58.4	1.09	57.4	1.11
Nursing Care Required (Mean)	5.7	7.3	0.78	5.0	1.13	7.2	0.79	7.3	0.78